

<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/764,662
	Filing Date	January 26, 2004
	First Named Inventor	Stuart T. Schwab et al.
	Art Unit	1731
	Examiner Name	Carlos N. Lopez
	Attorney Docket Number	T36-231-010

**I hereby revoke all previous powers of attorney given in the above-identified application.**

☐ A Power of Attorney is submitted herewith.

**OR**

☒ I hereby appoint the practitioners associated with the Customer Number: 005179

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

**SIGNATURE of Applicant or Assignee of Record**

Signature	<i>Vicki M. Schwab</i>		
Name	<i>Vicki M. Schwab, President, Ihor Technologies Inc.</i>		
Date	<i>8-28-06</i>	Telephone	<i>505 830 6986</i>

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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